



# **HEALTHCARE REFORM CONCERNS AND UNKNOWNNS**

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# THERE IS A LOT GOOD ABOUT HEALTHCARE REFORM

- “Universal” Access
- Medicaid Expansion
- Temporary High Risk Pools
- Ideally more equitable quality of care throughout the nation – ideally eliminating regional inequities
- Investment in Prevention
- Investment in Healthcare Workforce
- No Exclusion due to pre-existing conditions
- And much much more!



# THERE ARE A LOT OF UNKNOWNNS

- PPACA contains numerous provisions stating that federal agencies “shall promulgate regulations” or “shall by regulation” take certain actions to implement the legislation.- *Regulations Pursuant to the Patient Protection and Affordable Care Act) Curtis W. Copeland, April 13, 2010, Congressional Research Service*
- “The legislation tasks federal and state officials with writing regulations, making appointment and giving *precise* meaning to many terms. Many of these actions will provoke controversy. — “*The War Isn’t Over*” Henry J. Aaron and Robert Reischauer *The New England Journal of Medicine’s Health Care Reform Center*



# THERE ARE A LOT OF UNKNOWNNS

- “Although some regulations are required in 2010, it seems likely that other regulations will be issued for years, or even decades, to come. *Regulations Pursuant to the Patient Protection and Affordable Care Act*) Curtis W. Copeland, April 13, 2010, Congressional Research Service
- “Congress has regularly included provisions in the text of agencies’ appropriations bills directing or preventing the development of particular regulations.” *Regulations Pursuant to the Patient Protection and Affordable Care Act*) Curtis W. Copeland, April 13, 2010, Congressional Research Service



# THERE ARE A LOT OF UNKNOWNNS

- Political Landscape (Immediate)

What will Congress look like in 2011?

Given that Congress can, according to Congressional Research Office, “adjust” regulations in appropriations bills, would there be political will and power to dismantle parts of PPACA in a Congress with a different make-up?

- Political Landscape 2012

Given that many regulations may not be written by or go into effect until 2014, what would be the effect of a different administration in 2013 on PPACA?



# A SYSTEMIC ISSUE FOR HEALTHCARE IN THE USA - LACK OF ATTENTION TO ORAL HEALTH

- Reuters reported that the changes in health care passed in March require adults to buy health insurance in order to avoid a fine beginning in 2014.
- Missing from the new law is a requirement to purchase specific coverage like dental and vision. And though most health-care insurance plans cover minimum services for emergencies and prescription drugs, they often don't offer coverage for dental work on adults.
- The CDC said almost 75 percent of the 72 million people (under the age of 65) who currently have health insurance through a private provider do not have dental coverage



# A SYSTEMIC ISSUE FOR HEALTHCARE IN THE USA - LACK OF ATTENTION TO ORAL HEALTH

- **Some of the immediate restrictions of health reform do not apply to stand-alone dental plans**, including the elimination of annual and lifetime maximums and the expansion of the dependent child definition to age 26. The restrictions apply to group health plans as defined by the Health Insurance Portability and Accountability Act (HIPAA). Dental benefits are considered “excepted benefits” under current law; therefore, the restrictions do not apply.
- **Essential Benefits Package** – The health reform law includes an essential benefits package with a laundry list of minimum coverage. Part of that coverage includes oral health care benefits for children under the age of 21 – the pediatric dental benefit.



# THE IMPORTANCE OF SUPPORT SERVICES

- According to a national study of more than 1800 people living with HIV/AIDS done by the CAEAR Coalition and NAPWA social services (wrap around) are essential to health care access and treatment success. Many of these services provide a lifeline and stabilize people's lives thereby allowing them to attend to their prescribed regimen. There is a variety of social services that were indicated as important.
- Without access to these services, many stated that they would have fallen through the cracks and would not be in care.



# THE IMPORTANCE OF HOUSING

- According to the CAEAR / NAPWA report, housing is an essential need for PLWHA and was cited as one of the highest unmet needs.
- The National AIDS Housing Coalition has even more data on the critical nature of housing
  - For a person living with AIDS, homelessness or even the threat of homelessness, can lead to unnecessary illness and premature death. For many with HIV/AIDS, permanent housing means the difference between having access to medication, being able to manage a prescribed treatment regiment, safe and reliable living accommodations, and ability to pursue reentering the labor force.
- **Pure and simple: housing equals health care for PLWHA**



## WHAT WILL THE IMPACT OF HEALTHCARE REFORM BE ON THESE IMPORTANT SUPPORT SERVICES?

- Healthcare reform is about healthcare coverage
- Healthcare reform is not about providing services that helps people stabilize their lives so they can be successful in maintaining their healthcare
- Healthcare reform is not about housing



## WHAT WILL THE IMPACT OF HEALTHCARE REFORM BE ON THESE IMPORTANT SUPPORT SERVICES?

- Ryan White expires in September 2013, 3 months before many of the provisions of Healthcare Reform go into effect.
- ONAP has repeatedly expressed that there will be a need for Ryan White in a “Healthcare Reform World”
- What will the political world look like in 2013?
- Will that commitment to Ryan White continue?
- What will be the future commitment be for housing?



## WHAT WILL THE IMPACT OF HEALTHCARE REFORM BE ON THESE IMPORTANT SUPPORT SERVICES?

- Ryan White has always bumped up against “AIDS exceptionalism” arguments
- Early on advocates envisioned a world where healthcare was also about social justice- a world where the rest of the healthcare system would see the system of care developed around HIV/AIDS as a model and would come on board
- Instead the HIV/AIDS system has become more “medicalized” and has been slowly discarding the social justice portion of what has worked so well for people living with HIV/AIDS.



# CAN WE ENSURE ACCESS TO HOUSING AND SUPPORT SERVICES IN A “HEALTHCARE REFORM” WORLD?

- We need to be smart- Like NAHC, we need to provide more and more data to Congress with information about the importance of housing and supportive services in healthcare.
- We need to develop strategic alliances:
  - One important ally we can develop are those in the aging community.
    - Similar needs to keep people healthy- stable housing and support services.



# MOVING FORWARD

- We must stop being a community that reacts only to crisis
- We must begin doing the work NOW to make our case – data driven, demonstrating effectiveness
- We must think creatively
- We must stop thinking about protecting our own turf and reach out and develop alliances.

